

JUL-07-05 THU 01:06 PM

FAX NO.

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DOCKET NO.: PARK-4012

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Applicants: Alton F. Parker

Examiner: Lagman, Frederick

JUL 07 2005

Serial No.: 10/808,641

Art Unit: 3673

Filed: 03/25/04

For: DRAINAGE SUPPORT MATRIX

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

REQUEST FOR RECONSIDERATION

Sir:

Adjustment date: 07/19/2005 [DJONES]  
07/11/2005 WABDELRI 00000055 190513 10808641  
01 FC:2201 800.00 DA  
02 FC:2202 75.00 DA  
are respectfully requested in view of the Amendments and Remarks below.

07/19/2005 DJONES1 00000055 190513 10808641  
01 FC:2201 800.00 DA  
02 FC:2202 75.00 DA

10808641  
07/11/2005 WABDELRI 00000055 190513 10808641  
01 FC:2201 800.00 DA  
02 FC:2202 75.00 DA

Serial No. 10/808,641

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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/808641

## CLAIMS AS FILED - PART I

|                                  | (Column 1)    | (Column 2)               |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     | 24            |                          |
| FOR                              | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 24 minus 20 = | 4                        |
| INDEPENDENT CLAIMS               | 4 minus 3 =   | 1                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

• If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE  OTHER THAN  
OR SMALL ENTITY

| RATE      | FEES   | RATE         | FEES   |
|-----------|--------|--------------|--------|
| BASIC FEE | 385.00 | OR BASIC FEE | 770.00 |
| X\$9=     | 36     | OR X\$18=    |        |
| X43=      | 43     | OR X86=      |        |
| +145=     |        | OR +280=     |        |
| TOTAL     | 1464   | OR TOTAL     |        |

## CLAIMS AS AMENDED - PART II

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | 24                               | Minus                              | - 24 = 2      |
| Independent   | 4                                | Minus                              | - 4 = -       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

1/15/04

1/14/05

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | 29                               | Minus                              | - 26 = 3      |
| Independent   | 4                                | Minus                              | - 4 = -       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

1/11/17/22

1/1/05

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | 32                               | Minus                              | - 29 = 3      |
| Independent   | 72                               | Minus                              | - 4 = 8       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

1/26/11/13/17/18/19/22/27/28

• If the entry in column 1 is less than the entry in column 2, write "0" in column 1.

• If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".

• If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate row in Column 1.

Form PTO-876, Rev. 10-2003

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

SMALL ENTITY  
TYPE  OTHER THAN  
OR SMALL ENTITY

| RATE            | ADDITIONAL FEE | RATE               | ADDITIONAL FEE |
|-----------------|----------------|--------------------|----------------|
| X\$9=           | 18             | OR X\$18=          |                |
| X43=            |                | OR X86=            |                |
| +145=           |                | OR +280=           |                |
| TOTAL ADDT. FEE | 102            | OR TOTAL ADDT. FEE |                |

| RATE            | ADDITIONAL FEE | RATE               | ADDITIONAL FEE |
|-----------------|----------------|--------------------|----------------|
| X\$9=           | 75             | OR X\$18=          |                |
| X43=            |                | OR X86=            |                |
| +145=           |                | OR +280=           |                |
| TOTAL ADDT. FEE | 75             | OR TOTAL ADDT. FEE |                |

| RATE            | ADDITIONAL FEE | RATE               | ADDITIONAL FEE |
|-----------------|----------------|--------------------|----------------|
| X\$9=           | 75             | OR X\$18=          |                |
| X43=            | 800            | OR X86=            |                |
| +145=           |                | OR +280=           |                |
| TOTAL ADDT. FEE | 800            | OR TOTAL ADDT. FEE |                |

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